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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

CHAPTER 13 PLAN - AMENDED AND RELATED MOTIONS

Name of Debtor(s): Angela Tonya Bacskocky Case No: 14-32225

This plan, dated March 10, 2015, is:

- \Box the *first* Chapter 13 plan filed in this case.
- a modified Plan, which replaces the
 - ■confirmed or □unconfirmed Plan dated **04.23.2014**.

Date and Time of Modified Plan Confirming Hearing:

April 15, 2015 @ 9:10AM

Place of Modified Plan Confirmation Hearing:

Judge Phillips' Courtroom 5100 701 E Broad St, Richmond, VA 23219

The Plan provisions modified by this filing are:

Payment Schedule; Schedule A

Creditors affected by this modification are:

Bank of America

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$123,913.00

Total Non-Priority Unsecured Debt: \$161,676.13

Total Priority Debt: **\$165.00**Total Secured Debt: **\$105,590.62**

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- 1. Funding of Plan. The debtor(s) propose to pay the trustee the sum of \$410.00 Monthly for 10 months, then \$525.00 Monthly for 50 months. Other payments to the Trustee are as follows: NONE. The total amount to be paid into the plan is \$ 30,350.00.
- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
 - A. Administrative Claims under 11 U.S.C. § 1326.
 - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
 - 2. Debtor(s)' attorney will be paid \$\(\frac{2,055.00}{} \) balance due of the total fee of \$\(\frac{3,000.00}{} \) concurrently with or prior to the payments to remaining creditors.
 - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

 Creditor Internal Revenue Service
 Type of Priority Taxes and certain other debts
 Estimated Claim 165.00
 Payment and Term Prorata

 2 months

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
 - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

<u>Creditor</u> <u>Collateral</u> <u>Purchase Date</u> <u>Est Debt Bal.</u> <u>Replacement Value</u>

B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

<u>Creditor</u> <u>Collateral Description</u> <u>Estimated Value</u> <u>Estimated Total Claim</u>

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C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

Creditor

Collateral Description

Adeq. Protection Monthly Payment

To Be Paid By

-NONE-

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

Creditor

Collateral

Approx. Bal. of Debt or "Crammed Down" Value

Interest Rate

Monthly Paymt & Est. Term**

-NONE-

E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately 11
 %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately 9.13
 %.
- B. Separately classified unsecured claims.

Creditor -NONE-

Basis for Classification

Treatment

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- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
 - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

		Regular		Arrearage		Monthly
		Contract	Estimated	Interest	Estimated	Arrearage
Creditor	Collateral	Payment	Arrearage	Rate	Cure Period	Payment
Bank of America	Primary Residence: 806 W.	770.00	6,148.67	0%	16 months	Prorata
	Lancaster Road, Richmond VA 23222					
Wells Fargo Home Mtg	Primary Residence: 806 W.	269.27	528.34	5.25%	16 months	Prorata
	Lancaster Road, Richmond VA					
	23222					

B. Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

		Regular			Monthly
		Contract	Estimated Interest	Term for	Arrearage
Creditor	Collateral	Payment	Arrearage Rate	Arrearage	Payment
-NONE-					

C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

		Interest	Estimated	
Creditor	Collateral	Rate	Claim	Monthly Paymt& Est. Term**
-NONE-				

- **6. Unexpired Leases and Executory Contracts.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
 - A. Executory contracts and unexpired leases to be rejected. The debtor(s) reject the following executory contracts.

Creditor	Type of Contract
-NONE-	

B. Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

			Monthly	
			Payment	Estimated
Creditor	Type of Contract	Arrearage	for Arrears	Cure Period
-NONF-				

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	7.	Liens	Which	Debtor(S)	Seek to	Avoid
--	----	-------	-------	---------	----	---------	-------

A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor -NONE-

Collateral

Exemption Amount

Value of Collateral

B. Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

Creditor -NONE-

Type of Lien

Description of Collateral

Basis for Avoidance

- 8. Treatment and Payment of Claims.
 - All creditors must timely file a proof of claim to receive payment from the Trustee.
 - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
 - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
 - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- **9. Vesting of Property of the Estate.** Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- **10. Incurrence of indebtedness.** The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:

Signatures:		
Dated: March 10, 2015		
/s/ Angela Tonya Bacskocky	/s/ Richard W. Ferris	
Angela Tonya Bacskocky	Richard W. Ferris 31812	
Debtor	Debtor's Attorney	

Exhibits: Copy of Debtor(s)' Budget (Schedules I and J);

Matrix of Parties Served with Plan

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Certificate of Service

I certify that on March 10, 2015, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service List.

/s/ Richard W. Ferris
Richard W. Ferris 31812
Signature

530 E Main Street #1020
Richmond, VA 23219
Address
804-767-1800

Telephone No.

Ver. 09/17/09 [effective 12/01/09]

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United States Bankruptcy Court Eastern District of Virginia

In re	Angel	a Tonya Bacskocky			Case No	. 14-32225	
			Debto	or(s)	Chapter	13	
		SPECIAL NOTI	CE TO SE	CURE	D CREDITOR		
То:	1111 E	of America Main Street ond, VA 23219					
	Name o	of creditor					
		y Residence: 806 W. Lancaster Road, Rotion of collateral	ichmond VA	23222			
1.	The att	cached chapter 13 plan filed by the debtor((s) proposes (a	heck one	e):		
	•	To value your collateral. <i>See Section 3</i> amount you are owed above the value of					collateral, and any
		To cancel or reduce a judgment lien or Section 7 of the plan. All or a portion of					
	posed rel	tould read the attached plan carefully for lief granted, unless you file and serve a wi bjection must be served on the debtor(s), t	ritten objection	n by the	date specified and ap		
	Date of	objection due:				April 8, 2015	<u>5</u>
		and time of confirmation hearing:			•	015 @ 9:10AN	
	Place	of confirmation hearing:	Judge	Phillips	s' Courtroom 5100 7 Richm	01 E Broad St ond, VA 23219	
				Angela	Tonya Bacskocky		
				Name(s	s) of debtor(s)		
			By:		nard W. Ferris d W. Ferris 31812		
				Signati	ıre		
					or(s)' Attorney		
				☐ Pro s	e debtor		
					d W. Ferris 31812		
					of attorney for debtor Main Street #1020	(s)	
					ond, VA 23219		
				Addres	s of attorney [or pro	se debtor]	
				Tel.#	804-767-1800		
				Fax #	888-251-6228		

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CERTIFICATE OF SERVICE

I hereby certify that true copies of the foregoing Notice and attached Chapter 13 Plan and Related Motio	ons were served upon the
creditor noted above by	

■ first class mail in conformity with the requirements of Rule 7004(b), Fed.R.Bankr.P; or

☐ certified mail in conformity with the requirements of Rule 7004(h), Fed.R.Bankr.P

on this March 10, 2015 .

/s/ Richard W. Ferris

Richard W. Ferris 31812

Signature of attorney for debtor(s)

Ver. 09/17/09 [effective 12/01/09]

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United States Bankruptcy Court Eastern District of Virginia

In re	Angel	a Tonya Bacskocky			Case No		4-32225
			Debt	or(s)	Chapter	_13	3
		SPECIAL NOTION	CE TO SE	CURE	D CREDITOR		
То:	P.O. B	Fargo Home Mtg ox 14411 oines, IA 50306					
		of creditor					
	Primar	ry Residence: 806 W. Lancaster Road, Ri	ichmond VA	23222			
		ption of collateral					
1.	The at	tached chapter 13 plan filed by the debtor(s	s) proposes (check on	e):		
	•	To value your collateral. <i>See Section 3</i> amount you are owed above the value or					
		To cancel or reduce a judgment lien or a Section 7 of the plan. All or a portion of					
	posed re	nould read the attached plan carefully for lief granted, unless you file and serve a wr bjection must be served on the debtor(s), the	itten objectio	n by the	date specified and ap		
	Date	objection due:				April	l 8, 2015
	Date a	and time of confirmation hearing:			April 15, 2	<u>015 @</u>	9:10AM
	Place	of confirmation hearing:	Judg	e Phillips	s' Courtroom 5100 7 Richm		road St, A 23219
				Angela	a Tonya Bacskocky		
				Name(.	s) of debtor(s)		
			By:	/s/ Ricl	hard W. Ferris		
			·	Richar Signati	d W. Ferris 31812 ure		
				■ Debt	cor(s)' Attorney		
				□ Pro s	se debtor		
					d W. Ferris 31812		
					of attorney for debtor Main Street #1020	(s)	
					ond, VA 23219		
				Addres	ss of attorney [or pro	se debt	or]
				Tel.#	804-767-1800		
				Fax #	888-251-6228		

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CERTIFICATE OF SERVICE

I hereby certify that true	copies of the foregoing	Notice and attached	l Chapter 13 Plan a	and Related Motions	were served upon the
creditor noted above by					

■ first class mail in conformity with the requirements of Rule 7004(b), Fed.R.Bankr.P; or

☐ certified mail in conformity with the requirements of Rule 7004(h), Fed.R.Bankr.P

on this March 10, 2015 .

/s/ Richard W. Ferris

Richard W. Ferris 31812

Signature of attorney for debtor(s)

Ver. 09/17/09 [effective 12/01/09]

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				_
Fill	in this information to identify your c	ase:		
Del	otor 1 Angela Tony	ya Bacskocky		
_	otor 2 ouse, if filing)			
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF VIRGINIA	
Cas	se number		_	Check if this is:
(If kr	nown)			An amended filing
				A supplement showing post-petition chapter 13 income as of the following date:
0	fficial Form B 6I			MM / DD/ YYYY
S	chedule I: Your Inc	ome		12/13
Par	Describe Employment Fill in your employment			
١.	information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed	☐ Employed
	information about additional		☐ Not employed	☐ Not employed
	employers.	Occupation	Customer Service	
	Include part-time, seasonal, or self-employed work.	Employer's name	Need Supply Co.	
	Occupation may include student or homemaker, if it applies.	Employer's address	1600 Belleville Street Richmond, VA 23230	
		How long employed t	here? Since November	2013
Par	t 2: Give Details About Mor	nthly Income		
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for any	line, write \$0 in the space. Include your non-filing
•	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information for all emp	oyers for that person on the lines below. If you need
				For Debtor 1 For Debtor 2 or non-filing spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			603.94 \$ N/A

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 603.94 \$ N/A

3. +\$ 0.00 +\$ N/A

4. Calculate gross Income. Add line 2 + line 3.

Debtor 1		Angela Tonya Bacskocky		Case number (if known)		14-32225		
				Fo	or Debtor 1	For Debtor non-filing s		
	Cop	y line 4 here	4.	\$	603.94	\$	N/A	
5.	l ist	all payroll deductions:		_		<u></u>		
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	60.71	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	\$ \$	0.00	\$	N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- ^{311.+} 6.	Ψ_ \$	0.00	+ \$ \$	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	Ψ- \$	60.71 543.23	\$	N/A N/A	
7 . 8.		all other income regularly received:	7.	Ψ_	343.23	Ψ	IN/A	
0.	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	425.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance						
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies.	01	•	400.00	Φ.		
		Specify: SNAP Benefits WIC	_ 8f.	\$ \$	189.00	\$ \$	N/A	
	8g.	Pension or retirement income	_ 8g.	\$_	120.00 0.00	\$	N/A N/A	
	8h.	Other monthly income. Specify: Roommate Rent #1	8h.+	· ·		+ \$	N/A	
		Roommate Rent #2	_	\$	475.00	\$	N/A	
		Part Time Income		\$	50.00	\$	N/A	
_			_ [_				1
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$ <u> </u>	1,734.00	\$	N/A	
10	Colo	sulete monthly income. Add line 7 - line 0	10. \$		2.277.23 + \$	NI/A	= \$	0.077.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_		2,277.23 + \$	N/A	⁼ [•]	2,277.23
4.4			. –				J <u>L</u>	
11.		e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your		dent	s. vour roommates	s. and		
	othe	r friends or relatives.	•		•			
	Do n Spec	not include any amounts already included in lines 2-10 or amounts that are not a	availab	e to	pay expenses list		∍ <i>J</i> . +\$	0.00
	Орос							0.00
12.		the amount in the last column of line 10 to the amount in line 11. The res						
	Write	e that amount on the Summary of Schedules and Statistical Summary of Certail	n Liabii	ities	and Related Data	a, if it 12.	\$	2,277.23
	αμμι	100					· 	,
							Combine monthly	
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				,	
		No.						
		Yes. Explain:			<u> </u>		·	

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Fill	in this informa	ation to identify yo	our case:									
Deb	tor 1	Angela Tony	va Bacsk	ockv		Ch	eck if th	nis is:				
Angela Tonya Bacskocky Angela Tonya Bacskocky						■ An amended filing						
Deb	tor 2						A sup	plement show	ving post-petition cha	apter		
(Spc	ouse, if filing)					13 expenses as of the following date:						
Unit	United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA						MM / DD / YYYY					
Cas	e number 1	4-32225					A ser	parate filing for	r Debtor 2 because I	Debtor		
	nown)	. 02220				_			rate household			
Of	fficial Fo	orm B 6J										
		J: Your	_ Exper	nses						12/13		
info	ormation. If n		eded, atta	. If two married people ar ich another sheet to this n.								
	t 1: Desc Is this a joi	ribe Your House	ehold									
1.	•											
	No. Go t											
			ın a separ	ate household?								
			st file a sep	parate Schedule J.								
2.	Do you hav	ve dependents?	■ No									
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2			ependent's ge	Does dependent live with you?			
	Do not state								□ No			
	dependents	' names.							☐ Yes			
									□ No			
									□ Yes □ No			
									□ No □ Yes			
									□ res □ No			
									□ Yes			
3.	•	penses include of people other t	han	No					— 103			
		d your depende		Yes								
Est exp	imate your e	a date after the	our bankr	ly Expenses uptcy filing date unless y sy is filed. If this is a supp								
the		h assistance an		government assistance in cluded it on Schedule I: Y				Your expe	enses			
4.		•	ship exper	nses for your residence. In	nclude first mortgage							
		nd any rent for th			loidde mat mortgage	4.	\$		1,039.75			
	If not inclu	ded in line 4:										
		estate taxes				4a.			0.00			
	•	erty, homeowner'	-			4b.	· —		0.00			
			•	upkeep expenses		4c.	· —		0.00			
5		eowner's associa			mo oquity loose	4d.	\$ \$		0.00			
5.	AuditiOffdl	mortgage paym	emo ioi y	our residence , such as ho	me equity 10ans	ວ.	Φ		0.00			

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Debtor 1	Angela Tonya Bacskocky	Case num	ber (if known)	14-32225
C 1141	lision.			
6. Uti 6a.	lities: Electricity, heat, natural gas	6a.	\$	102.50
6b.	•	6b.	\$	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	101.95
6d.		6d.	\$	
	od and housekeeping supplies	ou. 7.	\$	0.00
	ildcare and children's education costs	7. 8.	\$	300.00
				0.00
	othing, laundry, and dry cleaning	9.	\$	20.00
	rsonal care products and services	10.		20.00
	dical and dental expenses	11.	\$	0.00
	Insportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	100.00
13. En t	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14. Ch	aritable contributions and religious donations	14.	\$	0.00
15. Ins				
	not include insurance deducted from your pay or included in lines 4 or 20.		•	
	a. Life insurance	15a.	· -	0.00
	b. Health insurance	15b.	·	0.00
	c. Vehicle insurance	15c.	·	77.00
	d. Other insurance. Specify:	15d.	\$	0.00
	kes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify: Personal Property Taxes	16.	\$	1.91
	tallment or lease payments:		<u> </u>	1.91
	a. Car payments for Vehicle 1	17a.	\$	0.00
	o. Car payments for Vehicle 2	17b.		0.00
	c. Other. Specify:	17c.	\$	0.00
	d. Other. Specify:	17d.		0.00
	ur payments of alimony, maintenance, and support that you did not report as	,	Ť ——	
ded	ducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.		0.00
	ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	_	
	ner real property expenses not included in lines 4 or 5 of this form or on Sche			2.22
	a. Mortgages on other property	20a.		0.00
	o. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.		0.00
	d. Maintenance, repair, and upkeep expenses	20d.		0.00
	e. Homeowner's association or condominium dues	20e.		0.00
1. O th	ner: Specify:	21.	+\$	0.00
2. Yo	ur monthly expenses. Add lines 4 through 21.	22.	\$	1,863.11
The	e result is your monthly expenses.			
	culate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	· -	2,277.23
23b	o. Copy your monthly expenses from line 22 above.	23b.	-\$	1,863.11
230	c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	414.12
	, ,			
For mod	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your diffication to the terms of your mortgage?			ease or decrease because of a
	No.			
	Yes. blain:			

AMEX P.O. Box 650448 Dallas, TX 75265

Aspire Recourses P.O. Box 530308 Atlanta, GA 30353

Bank of America 1111 E Main Street Richmond, VA 23219

Cap One Po Box 85520 Richmond, VA 23285

Chase Ink P.O. Box 15153 Wilmington, DE 19886

Citi Po Box 6241 Sioux Falls, SD 57117

Dept Of Ed/Aspire Reso Po Box 65970 West Des Moines, PA 17102

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Gecrb/Gapdc Po Box 965005 Orlando, FL 32896

Gecrb/Walmart Po Box 965024 Orlando, FL 32896

Geico Attn: Region 7 Claims P.O. Box 9518 Fredericksburg, VA 22403 Internal Revenue Service PO BOX 10 Kansas City, MO 64999-0010

Macy's PO BOX 8113 Mason, OH 45040

Mcydsnb 9111 Duke Blvd Mason, OH 45040

Sallie Mae P.O. Box 9500 Wilkes Barre, PA 18773

Sallie Mae Po Box 9655 Wilkes Barre, PA 18773

Thd/Cbna Po Box 6497 Sioux Falls, SD 57117

The Home Depot P.O. Box 182676 Columbus, OH 43218

Walmart./GECRB P.O. Box 530927 Atlanta, GA 30353

Wells Fargo Bank Po Box 14517 Des Moines, IA 50306

Wells Fargo Home Mtg P.O. Box 14411 Des Moines, IA 50306